The demand must be filed directly with the competent International Preliminary Examining Authority or, if two or more Authorities are competent, with the one chosen by the applicant. The full name or two-letter code of that Authority may be indicated by the applicant on the line below:

IPEA/ US _____

PCT

	CHAPTER II

DEMAND

under Article 31 of the Patent Cooperation Treaty:
The undersigned requests that the international application specified below be the subject of international preliminary examination according to the Patent Cooperation Treaty.

For International Preliminary Examining Authority use only

Identification of IPEA	Date of receipt of DEMAND

Box No. I IDENTIFICATION OF THE INTERNATIONAL APPLICATION	Applicant's or agent's file reference P70496WO0

International application No. PCT/US2005/001871	International filing date *(day/month/year)* 21 January 2005	(Earliest) Priority date *(day/month/year)* 23 January 2004

Title of invention
PERSON IDENTIFICATION PROCEDURE BY CONVERTING FINGERPRINTS AND GENETIC CODES INTO BARCODES, AND THE DEVICE USED IN THIS PROCEDURE

Box No. II   APPLICANT(S)

Name and address: *(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)* SALVA CALCAGNO, Eduardo, Luis 917 Junin Street 1113 Buenos Aires Argentina	Telephone No.
	Facsimile No.
	Teleprinter No.
	Applicant's registration No. with the Office

State *(that is, country)* of nationality: AR	State *(that is, country)* of residence: AR

Name and address: *(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)* ANDERSON, Flavio, Gabriel 1600 South Eads Street, Apt. 535-N Arlington, VA 22202 The United States of America

State *(that is, country)* of nationality: U.S.	State *(that is, country)* of residence: U.S.

Name and address: *(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)*

State *(that is, country)* of nationality:	State *(that is, country)* of residence:

☐ Further applicants are indicated on a continuation sheet.

Form PCT/IPEA/401 (first sheet) (April 2005)   *See Notes to the demand form*

International application No.

PCT/US2005/001871

Continuation of Box No. II   APPLICANT(S)

If none of the following sub-boxes is used, this sheet should not be included in the demand.

Name and address: *(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)*

State *(that is, country)* of nationality:	State *(that is, country)* of residence:

Name and address: *(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)*

State *(that is, country)* of nationality:	State *(that is, country)* of residence:

Name and address: *(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)*

State *(that is, country)* of nationality:	State *(that is, country)* of residence:

Name and address: *(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)*

State *(that is, country)* of nationality:	State *(that is, country)* of residence:

☐   Further applicants are indicated on another continuation sheet.

Form PCT/IPEA/401 (continuation sheet) (April 2005)   *See Notes to the demand form.*

International application No.

PCT/US2005/001871

Box No. III AGENT OR COMMON REPRESENTATIVE; OR ADDRESS FOR CORRESPONDENCE

The following person is [x] agent   [ ] common representative

and [x] has been appointed earlier and represents the applicant(s) also for international preliminary examination.

[ ] is hereby appointed and any earlier appointment of (an) agent(s)/common representative is hereby revoked.

[ ] is hereby appointed, specifically for the procedure before the International Preliminary Examining Authority, in addition to the agent(s)/common representative appointed earlier.

Name and address: *(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)*

HOLMAN, John, Clarke
Jacobson Holman PLLC
400 Seventh Street, N.W.
Washington, DC 20004
The United States of America

Telephone No.
(202) 638-6666

Facsimile No.
(202) 393-5350

Teleprinter No.

Agent's registration No. with the Office
22,769

[ ] Address for correspondence: Mark this check-box where no agent or common representative is/has been appointed and the space above is used instead to indicate a special address to which correspondence should be sent.

Box No. IV BASIS FOR INTERNATIONAL PRELIMINARY EXAMINATION

Statement concerning amendments:*

1. The applicant wishes the international preliminary examination **to start on the basis of:**

   [ ] the international application as originally filed

   the description [x] as originally filed

   [ ] as amended under Article 34

   the claims [ ] as originally filed

   [ ] as amended under Article 19 (together with any accompanying statement)

   [x] as amended under Article 34

   the drawings [x] as originally filed

   [ ] as amended under Article 34

2. [ ] The applicant wishes any amendment to the claims under Article 19 to be considered as reversed.

3. [ ] Where the IPEA wishes to start the international preliminary examination at the same time as the international search in accordance with Rule 69.1(b), the applicant requests the IPEA **to postpone** the start of the international preliminary examination until the expiration of the applicable time limit under Rule 69.1(d).

4. [ ] The applicant expressly wishes the international preliminary examination **to start earlier** than at the expiration of the applicable time limit under Rule 54*bis*.1(a).

* Where no check-box is marked, international preliminary examination will start on the basis of the international application as originally filed or, where a copy of amendments to the claims under Article 19 and/or amendments of the international application under Article 34 are received by the International Preliminary Examining Authority before it has begun to draw up a written opinion or the international preliminary examination report, as so amended.

Language for the purposes of international preliminary examination: .English ....

[x] which is the language in which the international application was filed.

[ ] which is the language of a translation furnished for the purposes of international search.

[ ] which is the language of publication of the international application.

[ ] which is the language of the translation (to be) furnished for the purposes of international preliminary examination.

Box No. V ELECTION OF STATES

The filing of this demand constitutes the election of all Contracting States which are designated and are bound by Chapter II of the PCT.

See Notes to the demand form

International application No.

PCT/US2005/001871

Box No. VI CHECK LIST					

The demand is accompanied by the following elements, in the language referred to in Box No. IV, for the purposes of international preliminary examination:

For International Preliminary Examining Authority use only

					received	not received
1.	translation of international application	:		sheets	☐	☐
2.	amendments under Article 34	:	2	sheets	☐	☐
3.	copy (or, where required, translation) of amendments under Article 19	:		sheets	☐	☐
4.	copy (or, where required, translation) of statement under Article 19	:		sheets	☐	☐
5.	letter	:	13	sheets	☐	☐
6.	other *(specify)*	:		sheets	☐	☐
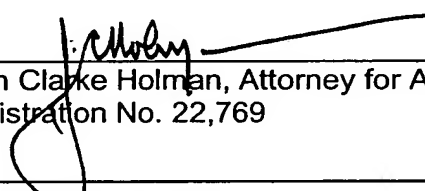
The demand is also accompanied by the item(s) marked below:

1. ☒ fee calculation sheet
2. ☐ original separate power of attorney
3. ☐ original general power of attorney
4. ☐ copy of general power of attorney; reference number, if any:

5. ☐ statement explaining lack of signature
6. ☐ sequence listing in electronic form
7. ☐ tables in electronic form related to a sequence listing
8. ☐ other *(specify)*:

Box No. VII SIGNATURE OF APPLICANT, AGENT OR COMMON REPRESENTATIVE

Next to each signature, indicate the name of the person signing and the capacity in which the person signs (if such capacity is not obvious from reading the demand).

John Clarke Holman, Attorney for Applicant
Registration No. 22,769

──── For International Preliminary Examining Authority use only ────

1. Date of actual receipt of DEMAND:

2. Adjusted date of receipt of demand due to CORRECTIONS under Rule 60.1(b):

3. ☐ The date of receipt of the demand is AFTER the expiration of 19 months from the priority date and item 4 or 5, below, does not apply.

   ☐ The applicant has been informed accordingly.

4. ☐ The date of receipt of the demand is WITHIN the time limit of 19 months from the priority date as extended by virtue of Rule 80.5.

5. ☐ Although the date of receipt of the demand is after the expiration of 19 months from the priority date, the delay in arrival is EXCUSED pursuant to Rule 82.

6. ☐ The date of receipt of the demand is AFTER the expiration of the time limit under Rule 54*bis*.1(a) and item 7 or 8, below, does not apply.

7. ☐ The date of receipt of the demand is WITHIN the time limit under Rule 54*bis*.1(a) as extended by virtue of Rule 80.5.

8. ☐ Although the date of receipt of the demand is after the expiration of the time limit under Rule 54*bis*.1(a), the delay in arrival is EXCUSED pursuant to Rule 82.
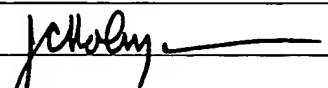
──── For International Bureau use only ────

Demand received from IPEA on:

PCT

FEE CALCULATION SHEET

Annex to the Demand

International application No. **PCT/US2005/001871**	For International Preliminary Examining Authority use only
Applicant's or agent's file reference **P70496WO0**	Date stamp of the IPEA

Applicant

SALVA CALCAGNO, Eduardo, Luis et al.

CALCULATION OF PRESCRIBED FEES

1. Preliminary examination fee .... **USD600.00** P

2. Handling fee *(Applicants from certain States are entitled to a reduction of 75% of the handling fee. Where the applicant is (or all applicants are) so entitled, the amount to be entered at H is 25% of the handling fee.)* .... **USD155.00** H

3. Total of prescribed fees
   Add the amounts entered at P and H
   and enter total in the TOTAL box **USD755.00**
   TOTAL

MODE OF PAYMENT

☐	authorization to charge deposit account with the IPEA (see below)	☐	cash
☐	cheque	☐	revenue stamps
☐	postal money order	☐	coupons
☐	bank draft	☒	other *(specify):*

Credit Card Payment Form
PTO-2038

AUTHORIZATION TO CHARGE (OR CREDIT) DEPOSIT ACCOUNT
(This mode of payment may not be available at all IPEAs)

IPEA/ **US**

☐ Authorization to charge the total fees indicated above.

Deposit Account No.: **06-1358**

☒ *(This check-box may be marked only if the conditions for deposit accounts of the IPEA so permit)* Authorization to charge any deficiency or credit any overpayment in the total fees indicated above.

Date: **18 January 2006**

Name: **John C. Holman**

Signature: _____

See Notes to the fee calculation sheet